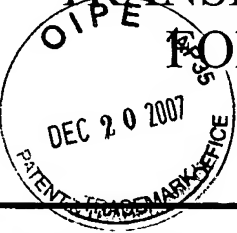
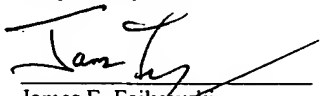
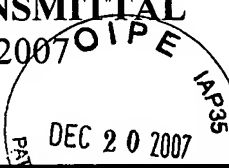


TRANSMITTAL FORM 	Application Serial Number	10/668,111
	Filing Date	September 19, 2003
	First Named Inventor	Bogomolov
	Group Art Unit	1743
	Examiner Name	Kerri A. Moss
	Attorney Docket No.	ACD-002
	Confirmation No.	7653
ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Check attached <input type="checkbox"/> Copy of Fee Transmittal Form <input checked="" type="checkbox"/> Amendment/Response <input type="checkbox"/> Preliminary <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Letter to Official Draftsperson including Drawings [Total Sheets ____] <input checked="" type="checkbox"/> Petition for Extension of Time <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Form PTO-1449 <input type="checkbox"/> Copies of IDS Citations <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Sequence Listing submission <input type="checkbox"/> Paper Copy/CD <input type="checkbox"/> Computer Readable Copy <input type="checkbox"/> Statement verifying identity of above	<input type="checkbox"/> Copy of Notice to File Missing Parts of Nonprovisional Application <input type="checkbox"/> Formal Drawing(s) <input type="checkbox"/> Request For Continued Examination (RCE) Transmittal <input type="checkbox"/> Power of Attorney (Revocation of Prior Powers) <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Executed Declaration and Power of Attorney for Utility or Design Patent Application <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> CD(s) for large table or computer program <input type="checkbox"/> Amendment After Allowance <input type="checkbox"/> Request for Certificate of Correction <input type="checkbox"/> Certificate of Correction (in duplicate)	<input type="checkbox"/> Notice of Appeal to Board of Patent Appeals and Interferences <input type="checkbox"/> Appeal Brief (in triplicate) <input type="checkbox"/> Status Inquiry <input checked="" type="checkbox"/> Return Receipt Postcard <input type="checkbox"/> Certificate of First Class Mailing under 37 C.F.R. 1.8 <input type="checkbox"/> Certificate of Facsimile Transmission under 37 C.F.R. 1.8 <input type="checkbox"/> Additional Enclosure(s) (please identify below)
CORRESPONDENCE ADDRESS		SIGNATURE BLOCK
Direct all correspondence to: Patent Administrator Kirkpatrick & Lockhart Preston Gates Ellis LLP State Street Financial Center One Lincoln Street Boston, MA 02111-2950 Tel. No.: (617) 261-3100 Fax No.: (617) 261-3175		Respectfully submitted,  Date: December 20, 2007 Reg. No.: 54,089 Tel. No.: (617) 261-3189 Fax No.: (617) 261-3175 James E. Fajkowski Attorney for the Applicant(s) Kirkpatrick & Lockhart Preston Gates Ellis LLP State Street Financial Center One Lincoln Street Boston, MA 02111-2950

FEE TRANSMITTAL
FY 2007


Complete if Known

Application Serial Number	10/668,111
Filing Date	September 19, 2003
First Named Inventor	Bogomolov
Group Art Unit	1743
Examiner Name	Kerri A. Moss
Attorney Docket No.	ACD-002
Confirmation No.	7653

METHOD OF PAYMENT

1. ☒ Payment Enclosed:
☒ Check ☐ Money Order ☐ Other

2. ☒ The Commissioner is hereby authorized to credit or charge any fee indicated below for this submission to Deposit Account No. 50-1721.

- ☐ Required Fees (copy of this sheet enclosed).
☒ Additional fee required under 37 CFR 1.16 and 1.17.
☒ Overpayment Credit.

3. ☒ Applicant claims small entity status.

FEE CALCULATION**1. FILING/SEARCH/EXAM/SIZE FEES****Large Entity**

Fee (\$)	Fee Description	Fee Paid
310	Utility filing fee	
510	Utility search fee	
210	Utility exam fee	
260	Utility size fee (each add'l 50 pgs. over 100)	
210	Design filing fee	
100	Design search fee	
130	Design exam fee	
260	Design size fee (each add'l 50 pgs. over 100)	

	Number Filed	Number Extra	Rate	Amount
Total Claims	- 20 =		x \$ 50.00 =	

Independent Claims	- 3 =		x \$210.00 =	
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☐ Multiple Dependent Claim(s), if any \$370.00 =

TOTAL:

SMALL ENTITY DISCOUNT:

SUBTOTAL (1) (\$).00

2. AMENDMENT CLAIM FEES

Claims Remaining After Amend.	Highest No. Previously Paid For	Present Extra	Rate	Fee Paid
Total	-	=	x \$ 50.00 =	
Indep.	-	=	x \$210.00 =	

☐ First Presentation of Multiple Dep. Claim + \$370.00 =

TOTAL: (\$)

SMALL ENTITY DISCOUNT: (\$)

SUBTOTAL (2) (\$).00

FEE CALCULATION (continued)**3. ADDITIONAL FEES**

Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description	Fee Paid
130	65	Surcharge - late filing fee or oath	
50	25	Surcharge - late provisional filing fee or cover sheet	
130	130	Non-English specification	
2,520	2,520	Request for ex parte reexamination	
120	60	Extension for reply within first month	
460	230	Extension for reply within second month	
1050	525	Extension for reply within third month	525.00
1640	820	Extension for reply within fourth month	
2230	1115	Extension for reply within fifth month	
510	255	Notice of Appeal	
510	255	Filing a brief in support of an appeal	
1030	515	Request for oral hearing	
400	400	Petitions to the Commissioner (Gp. I)	
200	200	Petitions to the Commissioner (Gp. II)	
130	130	Petitions to the Commissioner (Gp. III)	
180	180	Submission of Information Disclosure Statement	
810	405	Filing a submission after final rejection (37 CFR 1.129(a))	
810	405	For each additional invention to be examined (37 CFR 1.129(b))	
100	100	Certificate of Correction for applicant's error	
130	65	Submission of Terminal Disclaimer	
Other fee (Specify)			
Other fee (Specify)			

SUBTOTAL (3) (\$).00

SUBTOTAL (1) .00

SUBTOTAL (2) .00

SUBTOTAL (3) 525.00

TOTAL (\$).00

CORRESPONDENCE ADDRESS

Direct all correspondence to:

Patent Administrator
 Kirkpatrick & Lockhart Preston
 Gates Ellis LLP
 State Street Financial Center
 One Lincoln Street
 Boston, MA 02111-2950
 Tel. No.: (617) 261-3100
 Fax No.: (617) 261-3175

SIGNATURE BLOCK

Date: December 20, 2007
 Reg. No.: 54,089
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 Fax No.: (617) 261-3175

Respectfully submitted,

James E. Fajkowski
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